



March 22, 2017

The Honorable Thomas E. Price, M.D.
Secretary
United States Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Secretary Price:

Congratulations on becoming our nation's 23rd Secretary of the Department of Health and Human Services (the Department). On behalf of the more than 115,000 PAs (physician assistants) providing high-quality and comprehensive medical care throughout our nation, the American Academy of PAs (AAPA) looks forward to working closely with you and the Department to promote patient-centered healthcare and improve our healthcare system.

In 1965, the same year Medicare and Medicaid were enacted, the world's first "physician assistant" program was established by a physician at Duke University in North Carolina. Since that time, the PA profession has flourished. The first PAs started practicing medicine in 1967 – 50 years ago this year. Since that time, the profession has shown remarkable growth and demand has increased for PA services. Today, PAs practice medicine on healthcare teams with physicians and other providers in all 50 states, the District of Columbia, the majority of the U.S. territories, and the uniformed services.

Medicare and Medicaid were enacted before the first PAs began to deliver care to patients. For 50 years seniors, individuals with disabilities and low income Americans have relied on these programs for access to healthcare. These programs are an important part of the fabric of our American healthcare system. In order to continue to provide this care, we must continue to modernize these critical programs in order to serve the Americans who depend on them.

PAs are part of the solution. Many Medicare enrollees, especially those living in rural or other areas with health provider shortages, too often have trouble gaining access to providers and needed care.

By modernizing these programs to effectively utilize PAs, together we can help mitigate the anticipated provider shortage and address the unmet needs of our aging population with care that is both high quality and lower cost. . We look forward to the opportunity to work with you and leaders in the Department to address our shared goals of modernizing our nation's healthcare policies and programs to ensure affordable access to high quality medical care. As practicing clinicians, PAs play a critical role in the American healthcare system. We would like to highlight three health policy challenges where we hope to work together to improve our healthcare system:

1. Increasing healthcare transparency
2. Ensuring access to quality affordable care and
3. Improving how healthcare is delivered

Increase Healthcare Transparency

Some of the essential components of the transformation to value-based care are data on services delivered, outcomes, the cost of care, and the utilization of resources. Greater transparency in healthcare can provide valuable information for patients and policy makers. Transparency is critical to understanding how our healthcare dollars are spent, as well as providing visibility in to who is providing healthcare services.

With the help of your leadership, the 114th Congress passed the Medicare Access and CHIP reauthorization Act (MACRA) on a bipartisan basis to move our healthcare system towards one that rewards patient-centered, value-based care, and evaluates the care provided by PAs, physicians and nurse practitioners (NPs) by the same metrics. To realize the potential of a patient-centered, value-driven system, we must work together to improve transparency and remove the federal barriers that limit our ability to achieve progress for our patients and the American people.

AAPA remains concerned that current Medicare reimbursement policies obscure transparent tracking of the medical and surgical services provided by PAs to Medicare beneficiaries. Policies that create ‘hidden providers,’ with some or all of their services billed and attributed to another healthcare provider, hide critical data about how and where Medicare dollars are being spent and who is actually rendering care to beneficiaries. This information needs to be visible and properly attributed in order to track quality and improve accountability in our healthcare delivery system.

The newly implemented Merit-based Incentive Payment System (MIPS) seeks to compare health professionals on their quality of care, management of resources and use of patient-centered health technology. Due to the lack of transparency, PAs and nurse practitioners - well over 250,000 health professionals - may be unable to appropriately participate in the MIPS program due to fundamental flaws in the data collection process. These same health professionals may not be listed on patient-facing provider websites or in provider directories causing patients to wonder if they can receive care from these professionals.

In addition, not knowing which health professionals are available in a given community to provide care will make it difficult, if not impossible, for states or the federal government to know if network adequacy standards are being met to ensure that an appropriate number of primary care or specialty care health professionals are available to deliver medically necessary services in a given community.

Ensure Access to Quality, Affordable Care

Our country faces a growing provider shortage. Americans deserve access to quality care irrespective of where they live. This shortage is particularly acute in rural and medically underserved communities. PAs are one of the three recognized primary care providers. PAs manage and provide care across all healthcare specialties. The PA profession is expected to grow 30% between 2014 and 2024 according to the Bureau of Labor Statistics. At the same time, the Association of American Medical Colleges projects significant

physician shortages in both primary and specialty care by 2025. We can only meet patient needs if we are fully utilizing our healthcare workforce, including PAs.

To do this, federal policy changes must be made. Antiquated barriers continue to exist in federal laws and regulations that impede access to medical care provided by PAs. This is particularly true within Medicare, which was enacted before the PA profession entered the workforce. Outdated language in the Medicare program creates federal barriers that prevent PAs from practicing medicine at the level commensurate with their education and training. These federal barriers frequently are in conflict with state laws and impede progress towards the goal of more collaborative patient-centered value-based care.

Improve Healthcare Delivery

As clinicians, PAs practice team-based, collaborative, patient-centered medicine. Accordingly, AAPA looks forward to collaborating with the Department on policies that focus on caring for the needs of patients and that lead to:

- Affordable access to high-quality and cost efficient healthcare for all patients
- Encourage evidence-based medicine and the utilization of comparative-effectiveness research
- Optimal utilization of primary care
- Provision of basic services to all patients
- Patient choice of qualified providers, including PAs
- Emphasis on health promotion and disease prevention
- Fair and comprehensive reform of the medical liability system
- Focus on enhancing the relationship between the patient and clinician

Conclusion

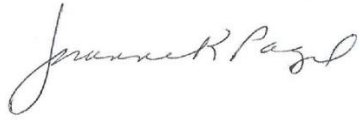
We appreciate the informed, bipartisan, team-driven policymaking approach you bring to the Department, as well as your experience as a physician with a commitment to work to improve the health and well-being of the American people.

In my day job as Executive Director of PA Services at Cleveland Clinic Health System, I work with Dr. Toby Cosgrove to ensure access to high quality affordable medical care for the communities we serve. We are meeting this goal by having PAs lead initiatives on distance health, E-health and express care online, as well as same day appointments. In addition, we are striving to have our PAs' work completely accounted for and in some instances they are listed as the primary care providers in our system to allow for transparency in reporting quality measures. And personally, I have worked with HHS to address the opioid crisis and would like to continue this with you and your team.

AAPA stands ready to assist you and leaders throughout the Department in developing and implementing policies to improve our healthcare system. As opportunities arise, we look forward to meeting with you to discuss the role of the PA profession, AAPA's healthcare agenda and how we can work together to improve the delivery of healthcare. Please do not hesitate to have members of your staff or others in the

Department contact Tate Heuer, Vice President for Federal Advocacy, at 571-319-4338 or theuer@aapa.org.

Sincerely,

A handwritten signature in black ink that reads "Josanne K. Pagel". The signature is written in a cursive style with a large initial 'J'.

Josanne K. Pagel, MPAS, PA-C, Karuna RMT, DFAAPA
President and Chair of the Board